

UNITED STATES DISTRICT COURT

for the ~~MIDDLE~~

District of *Tennessee*

Division *COLUMBIA*

Case No.

1:25-cv-0041 *KC*

(to be filled in by the Clerk's Office)

JAYSEPH RYAN GUNN #475851

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

CORE CIVIC

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)

RECEIVED

JUN 05 2025

US DISTRICT COURT
MID DIST TENN

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

Defendant(s)

- 2) ASHLEIGH VANDYKE (SCCF)
- 3) GRADY PERRY (SCCF)
- 4) HELAN MOON (SCCF)
- 5) MELISSA STRANN (SCCF)
- 6) TENNESSEE Dept. of CORRECTION
- 7) FRANK STRADA (TDOC)
- 8) BENJAMIN F BEAN (TDOC)
- 9) ROBERT TURMAN TDOC

I. The Parties to This Complaint

A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name

All other names by which
you have been known:

ID Number

Current Institution

Address

JAYSEPH RYAN GUNN #475851

JAYSEPH RYAN BELLAMY GUNN
#475851

SOUTH CENTRAL CORRECTIONAL FACILITY
(SCCF) 555 FORREST AVE.

Clifton Tenn 38425
City State Zip Code

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. Make sure that the defendant(s) listed below are identical to those contained in the above caption. For an individual defendant, include the person's job or title (*if known*) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

Defendant No. 1

Name

Job or Title (*if known*)

Shield Number

Employer

Address

CORE CIVIC

PRIVATE MANAGED COMPANY FOR TDOC
N/A

CORE CIVIC

5501 VIRGINIA WAY SUIT 110

Brentwood Tenn 37027
City State Zip Code

Individual capacity Official capacity

Defendant No. 2

Name

Job or Title (*if known*)

Shield Number

Employer

Address

TENNESSEE DEPT. OF CORRECTION

N/A

320 SIX AVE N. 6th Fl Rachel Jackson Bldg.

NASHVILLE Tenn 37243
City State Zip Code

Individual capacity Official capacity

Defendant No. 3

Name ASHLEIGH VANDYKE
Job or Title (*if known*) ASSISTANT CHIEF OF SECURITY
Shield Number N/A
Employer (CCA) SOUTH CENTRAL CORRECTIONAL FACILITY
Address 555 Forrest Ave.
Clifton TENN 38425
City State Zip Code
 Individual capacity Official capacity

Defendant No. 4

Name GRADY PERRY
Job or Title (*if known*) WARDEN
Shield Number N/A
Employer (CCA) SOUTH CENTRAL CORRECTIONAL FACILITY
Address 555 FOREST AVE
Clifton TENN 38425
City State Zip Code
 Individual capacity Official capacity

II. Basis for Jurisdiction

Under 42 U.S.C. § 1983, you may sue state or local officials for the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” Under *Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics*, 403 U.S. 388 (1971), you may sue federal officials for the violation of certain constitutional rights.

A. Are you bringing suit against (*check all that apply*):

Federal officials (a *Bivens* claim)
 State or local officials (a § 1983 claim)

B. Section 1983 allows claims alleging the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” 42 U.S.C. § 1983. If you are suing under section 1983, what federal constitutional or statutory right(s) do you claim is/are being violated by state or local officials?

TCA. 39-16-402 AND TCA. 39-16-403

TITLE VI, 14TH AMENDMENT RIGHT, CORE CIVIC / TDOC POLICIES

C. Plaintiffs suing under *Bivens* may only recover for the violation of certain constitutional rights. If you are suing under *Bivens*, what constitutional right(s) do you claim is/are being violated by federal officials?

DEFENDANT NO. 5

NAME HELEN MOON
Job or Title ASSISTANT WARDEN OF TREATMENT

Shield Number N/A

Employer (CCA) SOUTH CENTRAL CORRECTIONAL FACILITY
Address 555 FORREST AVE
Clifton CITY Tenn STATE 38425
ZIP Code

INDIVIDUAL CAPACITY OFFICIAL CAPACITY

DEFENDANT NO. 6

NAME MELISSA STRAWN
Job or Title S/0 GRIEVANCE CHAIR PERSON

Shield Number 14193878

Employer (CCA) SOUTH CENTRAL CORRECTIONAL FACILITY
Address 555 FORREST AVE
Clifton CITY Tenn 38425

INDIVIDUAL CAPACITY OFFICIAL CAPACITY

DEFENDANT NO. 7

NAME FRANK STRADA
Job or Title COMMISSIONER TDOC

Shield Number N/A

Employer TDOC
Address 6th FL RACHEL JACKSON BLDG, 320 SIXTH AVE N
NASHVILLE CITY Tenn 37243

INDIVIDUAL CAPACITY OFFICIAL CAPACITY

DEFENDANT NO. 8

NAME BENJAMIN F BEAN
JOB OR TITLE ASSISTANT COMMISSIONER
SHIELD NUMBER N/A
EMPLOYER (TDOC)
ADDRESS 6th FL RACHEL JACKSON Bldg, 320 SIXTH AVE N
Nashville, Tenn 37243
 INDIVIDUAL CAPACITY OFFICIAL CAPACITY

Defendant No. 9

NAME Robert Turman
JOB OR TITLE CONTRACT monitor OF OPERATIONS
SHIELD NUMBER N/A
EMPLOYER TDOC / SCCF
ADDRESS 555 Forrest AVE
Clifton, Tenn 38425
 INDIVIDUAL CAPACITY OFFICIAL CAPACITY

N/A

D. Section 1983 allows defendants to be found liable only when they have acted “under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia.” 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under *Bivens*, explain how each defendant acted under color of federal law. Attach additional pages if needed.

CORE CIVIC AND THESE LISTED OFFICIALS HAVE VIOLATED

III. Prisoner Status

Indicate whether you are a prisoner or other confined person as follows (*check all that apply*):

- Pretrial detainee
- Civilly committed detainee
- Immigration detainee
- Convicted and sentenced state prisoner
- Convicted and sentenced federal prisoner
- Other (*explain*) _____

IV. Statement of Claim

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

A. If the events giving rise to your claim arose outside an institution, describe where and when they arose.

N/A

B. If the events giving rise to your claim arose in an institution, describe where and when they arose.

SOUTH CENTRAL CORRECTIONAL FACILITY

IV Pg 4

SINCE BEING RELEASED FROM SEGREGATION
IN NOV OF 2024, SCCF HAS STILL ALLOWED
A.C.O.S. ASHLEIGH VANDYKE TO RETALIATE
AND HARASS ME. THIS A.C.O.S. GOES OUT HER
WAY AND JOB TITLE TO MAKE SURE I DON'T GO
HOME. I WAS CONVICTED OF DISCIPLINARIES AND
THREATENED WITH SEGREGATION IF I WENT TO MY
HEARINGS. SHE VIOLATES TDOC POLICY 502.01
BY HOLDING HEARINGS WITHOUT ME PRESENT.

GRADY PERRY AND HELAN MOON WHOM ARE THE
WARDEN AND ASSISTANT WARDEN ALLOW MS. VAN
DYKE TO ACT OUTSIDE OF HER JOB TITLE.

ROBERT TURMAN WHOM IS A TDOC OFFICIAL
AND OVERSEES SCCF IS SUPPOSED TO MAKE
SURE THAT ALL TDOC POLICIES ARE BEING

FOLLOWED AND ENFORCED. MELISSA STRANN
WHOM IS THE GRIEVANCE CHAIRPERSON WILL

HOLD MY GRIEVANCES AND RUBBER STAMP THEM
JUST SO THEY WILL BE DENIED AND NO ACTION

BEING TAKEN. SINCE BEING LOCKED BACK UP
IN SEGREGATION (PROTECTIVE CUSTODY) DUE TO THE

FACILITY AND A.C.O.S. VANDYKE PUTTING MY
LIFE IN DANGER WITH OTHER INMATES BY SPREADING

RUMLRS, SHE HAS STOPPED ME FROM SEEING THE
LEGAL AID. I HAVE WRITTEN BOTH CORE-CIVIC,

TENNESSEE DEPT. OF CORRECTIONS THAT I AM IN

IRREPARABLE HARM AND HAVE DIRECT PROOF. FRANK
STRADA WHOM IS THE COMMISSIONER AND BENJAMIN

BEAN THE ASSISTANT COMMISSIONER ARE AWARE
OF ALL COMPLAINTS AND FAIL TO ACT AND ALLOW

THE RETALIATION AND NEGLIGENCE TO OCCUR.

D Pg 4

CORE CIVIC'S CODE OF ETHIC'S AND THEIR
FACILITY STANDARDS OF POLICY 3-3 BB NARDEN
GRAY PERRY, AWT Helan Moon, A.C.O.S. ASHLEIGH
VANDYKE, S/C/O MELISSA STRAWN OF THEIR
OWN PERSONAL CONDUCT, RETALIATION AND FAILED
TO REPORT SUCH OCCURANCES.

FRANK STRADA, BENJAMIN F BEAN, ROBERT
TURMAN AND THE TENNESSEE DEPT. OF CORRECTION
HAS ALLOWED SOUTH CENTRAL OFFICIAL DEPRIVE
ME OF MY RIGHT OF LIFE, LIBERTY AND PROPERTY
DUE TO NOT INVESTIGATING SUCH CLAIMS I
HAVE BROUGHT TO THEM BY MY FAMILY AND
MYSELF. HAVE FILED OVER 100 GRIEVANCES SINCE
THESE ISSUES HAVE AROSE. ALL STAFF MEMBERS
ARE AWARE OF THE PHYSICAL, MENTAL AND FINANCIAL
ABUSE THAT I HAVE BEEN PUT THROUGH BY
SCEF AND LISTED OFFICIALS.

C. What date and approximate time did the events giving rise to your claim(s) occur?

DATES AND TIMES ARE DOCUMENTED AT FACILITY; LAST 3/21/25

D. What are the facts underlying your claim(s)? (For example: *What happened to you? Who did what? Was anyone else involved? Who else saw what happened?*)

WRONGLY CONVICTED OF DISCIPLINARY INFRACTIONS, RETALIATION

V. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

N/A

VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

I AM SEEKING DAMAGES OF MENTAL DEPRIVATION, OFFICIALS

VI RELIEF

LISTED RESIGNATION, ALL LISTED OFFICIALS HAVE PLAYED SOME FORM OF ROLE TO RETALIATE, HARASS AND NEGLECT AGAINST ME. ALL OFFICIALS HAVE PARTICIPATED IN MYSELF HAVING TO LIVE IN FEAR OF MY LIFE DUE TO OFFICIAL MISCONDUCT AND OFFICIAL OPPRESSION.

REFUSING TO ALLOW ME ACCESS TO LEGAL ASSISTANCE, FOR INCOMPATIBLES BE PLACED ON OFFICIALS LISTED.

VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act (“PLRA”), 42 U.S.C. § 1997e(a), requires that “[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted.”

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

Yes

No

If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

SOUTH CENTRAL CORRECTIONAL FACILITY

B. Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?

Yes

No

Do not know

C. Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?

Yes

No

Do not know

If yes, which claim(s)?

ALL CLAIMS, HOWEVER NO ONE WILL INVESTIGATE

D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?

Yes

No

If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

Yes

No

E. If you did file a grievance:

1. Where did you file the grievance?

SOUTH CENTRAL CORRECTIONAL FACILITY

2. What did you claim in your grievance?

RETALIATION, NEGLIGENCE, VIOLATION OF 14TH AMENDMENT
RIGHT, TDOC POLICY VIOLATIONS

3. What was the result, if any?

DENIED EVERYTIME I FILE, Conflict of Interest with
Chair Woman.

4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)

Grievance Chairperson Does NOT process my Grievances
properly,

F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here:

Other Reasons, Sccf Does NOT HAVE AN ALTERNATE GRIEVANCE CHATR person, CONFLICT OF INTREST WITH current CHATR person.

2. If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:

FILED A 5-1C INCIDENT STATEMENT, CORE-CIVIC OFFICIALS AND TDOC OFFICIALS

G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.

NO OFFICIAL AT Sccf WILL INVESTIGATE CLAIMS, FILED OVER 50 GRIEVANCE(S)
(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.)

VIII. Previous Lawsuits

The “three strikes rule” bars a prisoner from bringing a civil action or an appeal in federal court without paying the filing fee if that prisoner has “on three or more prior occasions, while incarcerated or detained in any facility, brought an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent danger of serious physical injury.” 28 U.S.C. § 1915(g).

To the best of your knowledge, have you had a case dismissed based on this “three strikes rule”?

Yes

No

If yes, state which court dismissed your case, when this occurred, and attach a copy of the order if possible.

N/A

A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

Yes

No

B. If your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (*If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.*)

1. Parties to the previous lawsuit

Plaintiff(s) JAYSEPH RYAN GUNN # 475851

Defendant(s) CORE-CIVIC, TENNESSEE DEPT. OF CORRECTION

2. Court (*if federal court, name the district; if state court, name the county and State*)

MIDDLE DISTRICT

3. Docket or index number

1:24-cv-00073

4. Name of Judge assigned to your case

Judge Trauger

5. Approximate date of filing lawsuit

08/05/2024

6. Is the case still pending?

Yes

No

If no, give the approximate date of disposition.

2/3/25

7. What was the result of the case? (*For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?*)

DISMISSED, NOW IN APPEALS COURT, U.S. COURT SIXTH CIRCUIT

C. Have you filed other lawsuits in state or federal court otherwise relating to the conditions of your imprisonment?

(B. Pg 9)

- 3.) GRADY Perry
- 4.) Robert TURMAN
- 5.) ASHLEIGH VAN DYKE
- 6.) SOUTH CENTRAL CORRECTIONAL FACILITY
- 7.) CIERRA PIERCE

Yes

No

D. If your answer to C is yes, describe each lawsuit by answering questions 1 through 7 below. (*If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.*)

1. Parties to the previous lawsuit

Plaintiff(s) N/A

Defendant(s) N/A

2. Court (*if federal court, name the district; if state court, name the county and State*)

N/A

3. Docket or index number

N/A

4. Name of Judge assigned to your case

N/A

5. Approximate date of filing lawsuit

N/A

6. Is the case still pending?

Yes

No

If no, give the approximate date of disposition

N/A

7. What was the result of the case? (*For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?*)

N/A

IX. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 5/29/25

Signature of Plaintiff

Yunn, Jayseph R.

Printed Name of Plaintiff

YUNN, Jayseph R.

Prison Identification #

00475851

Prison Address

555 Forrest Ave

Clifton City

Tenn State

38425 Zip Code

B. For Attorneys

Date of signing: _____

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

City

State

Zip Code

Telephone Number

E-mail Address



JAYSEPH GUNN
475851
555 Forrest Ave.
P.O. Box 279
Clifton Tenn
38425

CLERK U.S. DISTRICT COURT
MIDDLE DISTRICT OF TENNESSEE
719 Church St. SUIT 1300
NASHVILLE Tenn 37203

37203-7000 CONS
JULY 1 1995